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Official Committee Hansard

**HOUSE OF  
REPRESENTATIVES**

STANDING COMMITTEE ON LEGAL AND CONSTITUTIONAL  
AFFAIRS

**Reference: Crime in the community**

FRIDAY, 7 NOVEMBER 2003

SYDNEY

BY AUTHORITY OF THE HOUSE OF REPRESENTATIVES

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**HOUSE OF REPRESENTATIVES**  
**STANDING COMMITTEE ON LEGAL AND CONSTITUTIONAL AFFAIRS**  
**(Subcommittee)**

**Friday, 7 November 2003**

**Members:** Mrs Bronwyn Bishop (*Chair*), Mr Murphy (*Deputy Chair*), Mr Cadman, Mr Kerr, Mr McClelland, Ms Panopoulos, Mr Sciacca, Mr Secker, Mr Somlyay and Dr Washer

**Members in attendance:** Mrs Bronwyn Bishop, Mr Cadman and Ms Panopoulos

**Terms of reference for the inquiry:**

To inquire into and report on:

The extent and impact of crime and fear of crime within the Australian community and effective measures for the Commonwealth in countering and preventing crime. The Committee's inquiry shall consider but not be limited to:

- a) the types of crimes committed against Australians
- b) perpetrators of crime and motives
- c) fear of crime in the community
- d) the impact of being a victim of crime and fear of crime
- e) strategies to support victims and reduce crime
- f) apprehension rates
- g) effectiveness of sentencing
- h) community safety and policing

**WITNESSES**

**FENLON, Mr Mark Anthony (Private capacity) .....1565**  
**HICKIE, Professor Ian, Executive Director, Brain and Mind Research Institute .....1584**

**Subcommittee met at 10.05 a.m.****FENLON, Mr Mark Anthony (Private capacity)**

**CHAIR**—I now declare open this public hearing of the House of Representatives Standing Committee on Legal and Constitutional Affairs inquiry into crime in the community: victims, offenders and fear of crime. Throughout the course of this inquiry the committee has heard some serious allegations of mismanagement and corruption amongst high-level public officials and members of the New South Wales Police force. Earlier this year, the committee heard from a number of New South Wales serving and ex-police officers, who gave evidence about corruption, a mates network and a police hierarchy where complaints are ignored or given the revolving door treatment. One of those officers was Mr Mark Fenlon, who is back today to provide further evidence about the falsification of crime stats within the Blacktown Local Area Command. Following Mr Fenlon, the committee will hear from Professor Ian Hickie, a psychiatrist and the Executive Director of Sydney University's Brain and Mind Research Institute. Professor Hickie will talk to the committee about mental illness risks associated with substance abuse.

Mr Fenlon, it is a pleasure to have you back on this occasion. The committee has authorised your previous submissions for publication. In August you supplied the committee with a copy of the final report of the Ombudsman into your complaint, which the committee accepted as further evidence to the inquiry. I think the significance of your testimony this morning is completing the circle of the evidence that you gave—and you might like to recap it—about how the knife search figures were falsified, and you attempted to make those complaints and nobody would listen, but finally the Ombudsman investigated and said that you were quite correct. Would you might make a statement?

**Mr Fenlon**—I have prepared a five-page document, which I will read. It is a fairly brief. It will fill in the blanks since the receipt of that document. In mid-August this year I received correspondence from the office of the New South Wales Ombudsman, entitled *Final report—police handling of CIS 02000834* and dated 13 August 2003. That report related to the police internal investigation of the complaint I made in November 2001 to the New South Wales Ombudsman concerning the falsification of knife searches and move-on statistics by New South Wales Police.

Upon reading that report, I became alarmed regarding many aspects of the police investigation—aspects which cast serious doubt upon the integrity and veracity of the police investigation into my complaint and, more importantly, aspects apparently completely overlooked by the New South Wales Ombudsman in his overall acceptance of the police investigation as being satisfactory. Having read that report, I contacted Mr Simon Cohen of the Ombudsman's office, and a meeting was arranged to discuss the findings of the report with Assistant Ombudsman Mr Steve Kinmond on 7 August 2003. I met Mr Kinmond on that date and discussed the report in detail. During that meeting I expressed to Mr Kinmond my dissatisfaction with the quality of the internal police investigation, its findings and the actions taken by the police force regarding the matter. I was also critical of his report, stating that it appeared to me that he had been selective as to his comments, glossing over or completely ignoring relevant, specific issues in his report.

To his credit, Mr Kinmond accepted that he was not privy to certain details surrounding the issues I raised with him when the report was produced. He subsequently invited me to provide a written submission to him regarding my concerns and gave an undertaking that he would consider reviewing the matter. By email the following day I submitted to his office a 15-page document comprehensively outlining 12 issues which, in my view, clearly presented serious—and, I believe, deliberate—shortcomings regarding the police internal investigation, its findings and the actions taken by Assistant Commissioner Robert Waites against involved officers.

I will summarise the issues outlined in that document. Issue 1: there was no thorough investigation regarding the correlation between the emergence of artificially inflated statistics and the appearance of local area commanders at operational crime reviews. This line of inquiry had been completely ignored by the police investigators and was not commented on by Mr Kinmond in his report. Issue 2: there was no investigation by the police force concerning a serious matter arising from my complaint concerning false knife searches which related to the similar artificial inflation of information—that is, intelligence reports. This matter was completely ignored by the police investigators in their investigation and was not commented on by Mr Kinmond in his report.

Issue 3: information concerning the investigation's outcomes and findings had been leaked to police being investigated and I questioned the probity and confidentiality surrounding the police investigation. Concerns I raised with the New South Wales Ombudsman at the time I became aware of this information were not investigated by the New South Wales Ombudsman. Issue 4: no explanation was sought by the New South Wales Ombudsman of the Commissioner of Police or the former minister of police, both being made aware of my complaint for some time, regarding their failure to deal with my complaint in a proper and timely manner—a failure which subsequently led to the forced exposure of my identity and the nature of my complaint to those who would later be subject to investigation. The issue in relation to the time taken for the investigation was glossed over by Mr Kinmond, who made only scant reference to the time taken for police to conduct an investigation of this matter. He made no attempt to pursue these issues further with either the commissioner or the former minister of police despite the importance of establishing or refuting the demonstration of negligence, incompetence or misconduct on the part of these senior government officials in failing to deal with such a serious complaint and indeed in establishing whether such a delay was politically motivated or not.

Issue 5: the involvement and conduct of Deputy Commissioner Madden and Chief Inspector Glynnis Lapham of the Internal Witness Support Unit had not been adequately investigated. As previously indicated in my evidence, I was contacted on a Saturday morning at 7.30 a.m. by Chief Inspector Lapham of the Internal Witness Support Unit, who bounced me for information concerning an article that was to appear in the *Sun Herald* the following day. The excuses proffered by Lapham and Madden in relation to the matter were accepted on face value by the Ombudsman. I found that disquieting to say the least.

**CHAIR**—Which was the newspaper article you were referring to?

**Mr Fenlon**—It was in the *Sun Herald*. I think it was entitled 'Knife job on figures'. Issue 6: a lack of any offer of indemnity against prosecution for officers willing to come forward with information; the willingness of the police investigators to accept as fact the statements of police interviewed without the corroboration of other evidence and the complete failure on the part of

the investigators to follow specific lines of inquiry. Issue 7: the complete failure to investigate or comment upon the relationship between Superintendent Wales and one of the key involved officers interviewed as a result of my complaint.

**CHAIR**—He was the area commander of the area where these figures were bodgie?

**Mr Fenlon**—That was Blacktown. He was the Blacktown Local Area Commander. That officer—the one I alleged had a relationship with Superintendent Wales—was, during the course of the police investigation into my complaint, found to have recorded an inordinately high number of knife searches and move-ons. This officer's presentation, by Superintendent Wales, to the former Commissioner of Police, Peter Ryan, at an operational crime review, as an exceptional officer based upon those statistics, apparently did not give rise to any suspicions on the part of the police investigators into my complaint regarding the possibility of collusion between Superintendent Wales and this officer during the course of the investigation. Nor apparently did Wales's appearance at court as a character witness for that officer, whilst that officer was facing a substantial number of charges for unlawfully accessing information contained in the COPS system, arouse any suspicion. This information apparently had no influence upon the investigators and the manner in which they investigated the matter.

**CHAIR**—Are you saying that the man who bodgied up the knife search figures had also used the COPS stats in an unauthorised way?

**Mr Fenlon**—Correct. He had been charged and appeared at court and Superintendent Wales, the local area commander, had appeared as a character witness at his hearing. I am no Sherlock Holmes, but those sorts of things should be considered when conducting an investigation. They just were not touched. In my original interview with the police investigators—Detective Chief Inspector Matthews and Detective Sergeant Shoebridge—I specifically mentioned that relationship. I pointed out what that relationship was and how this individual had been treated differently, if you like, by Superintendent Wales. I believe that the unique position that this police officer held enabled the manipulation of statistics within the command.

**CHAIR**—Are you saying that Superintendent Wales not only knew about it but also aided and abetted the misrepresentation of the figures?

**Mr Fenlon**—Yes, most certainly. He could not have been ignorant. I will get on to other issues. Issue 8: the isolation of the investigation and its findings to the Blacktown police command and individuals within that command, despite evidence that the conduct was widespread throughout the state. The extent of the conduct that was discovered by the police investigation has not been quantified in either the police investigation or the report of Mr Kinmond. In other words, they have not said what other local area commanders or how many other police were involved state wide. If it was a state-wide phenomenon—and that has been conceded by Mr Kinmond—we do not know how far it went or who was involved.

**CHAIR**—And the investigation did not go any further?

**Mr Fenlon**—No. They confined it to Blacktown. I believe that was deliberate. Both the Police service and the Ombudsman's office are looking at it in terms of a systems failure. They are saying, 'It is a systems failure. We have learned from Blacktown, and we will deal with

Blacktown this way. Let's not go hunting individuals or the reasons why this occurred. We will just put it down to a systems failure and ignorance on the part of the police involved in the input of data.'

**CHAIR**—It comes down to the issue of—and we are finding it again and again—if you do not want to look at the substance, let us have some process.

**Ms PANOPOULOS**—If, in the specific situation that was investigated, it has been put down to ignorance, the conclusion that can be drawn is that there was widespread ignorance right across the state.

**Mr Fenlon**—Correct, and widespread managerial incompetence throughout the service. Issue 9: the blatant, deliberate and wilful attempt by Assistant Commissioner Waites to absolve Superintendent Wales and all other local area commanders from any accountability. His ludicrous premise put forward to support his decision not to take action against Wales, his willingness to accept the conduct of junior officers as arising from ignorance rather than any deliberate attempt to drive up the statistics and his readiness to accept that the artificial inflation could not have been foreseeable by Wales or, indeed, by any other local area commanders can only be described as preposterous. It defies logic that he adopts these views in his review of the police investigation despite evidence that the statistics were being inflated not only at Blacktown but also at many other commands for a period of nearly five years.

**CHAIR**—So they were bodgied up for five years?

**Mr Fenlon**—For the five years since the legislation was introduced the statistics have been rubbish. Now what Mr Waites would have the Ombudsman believe—and what the Ombudsman has basically had no choice but to accept—is that nobody knew that this was going on. It was unforeseeable, the police were inadvertently doing the wrong thing and nobody out of the 14,000 police officers we have in the state picked it up for five years except the person sitting before you now.

**CHAIR**—It is a worry.

**Mr Fenlon**—It is a major concern. It truly is. Mr Waites has simply adopted these views without any attempt to quantify or justify them. Those views have been accepted on face value by Mr Kinmond, the Assistant Ombudsman. No other local area commanders were interviewed. Indeed no police officers from outside the Blacktown command were interviewed, none at all. It was apparent to me that this was a deliberate oversight on the part of the police investigation designed to avoid the exposure of the degree of involvement of the commanders in the misconduct I alleged or alternatively—and just as dangerously—the degree of managerial incompetence among such commanders who, if we are to take Mr Waites seriously, did not know this practice was occurring within their commands and in any case could not have reasonably expected to have known that it was going on within their commands for a period of five years. It is just ludicrous. It is absolutely stupid. It defies logic.

Issue 10: the alleged failings of systems and limitations within COPS for recording searches provided a convenient yet, given the scale of the problem, implausible excuse for the inflation of statistics. Police internal investigators, Mr Waites, and indeed Mr Kinmond, did not even



consider for investigation or indeed comment upon a more plausible and, I contend, real explanation for the artificial inflation of the statistics on COPS. That is the pre-existing knowledge of those very failings within the quality control systems of COPS by commanders and the fact that those failings in the processes were deliberately exploited and manipulated by local area commanders to deliver high returns for knife searches and move-ons under pressure by their superiors. In other words, they knew what the failings were in terms of the quality control for COPS.

**CHAIR**—With the move-ons, are you saying that they were bodgied figures too?

**Mr Fenlon**—Yes, every time there was a knife search the police officer would also generate a move-on.

**CHAIR**—So they would say, ‘We had the knife search and we just moved them on’?

**Mr Fenlon**—That is it.

**CHAIR**—Isn’t it illegal to have a knife anyway?

**Mr Fenlon**—No, it is not. If you have reasonable cause to have the knife on your person, it is not an offence.

**CHAIR**—Do knives come in categories? Are some knives not legal like concealed knives, flick knives or whatever or are they all legal?

**Mr Fenlon**—If you are a hunter—I have been hunting—you can carry a knife that is perhaps a foot long depending on what you are doing, providing you have a legal reason to have it.

**CHAIR**—Around suburban Blacktown?

**Mr Fenlon**—Obviously not, but if you have a penknife in your pocket, it may be your habit to buy an apple and peel it. You may be a tobacco smoker and you may buy your tobacco in plug form. My father did it and his father before him.

**CHAIR**—You are talking about something quite small aren’t you?

**Mr Fenlon**—He would buy the plug, cut his tobacco with a small knife, roll it and put it in his pouch. If one has a lawful reason to have it—and that has to be determined before the knife is confiscated—for example, packers from shopping centres will carry small Stanley knives with them purely for the purpose of opening up cartons and boxes et cetera.

**CHAIR**—Armed robbery with the use of firearms appears to have declined but the gap has been filled by armed robbery using knives. Presumably, that is not a Stanley knife or a little penknife for peeling your apple; it has to be a substantial knife, has it not?

**Mr Fenlon**—It can be anything. I have had knives of all descriptions pulled on me. I have had sharpened screwdrivers pulled on me. It depends on the capacity of the implement to do damage.

A Stanley knife can probably do more damage than a carving knife. It depends on the individual using it and whether the individual has struck.

**CHAIR**—If they chose to slash instead of stab?

**Mr Fenlon**—I read an article about Liverpool police officers in the UK in single foot patrols. They found that their police officers were being slashed with Stanley knives across the face, neck and chest. The wounds were not intended to kill. They were not deep enough to kill but they certainly created a mess of the police officer concerned. It was an issue of security in relation to whether police officers should be patrolling on their own et cetera.

I could pick up a piece of stick and sharpen it. I could pick up a pen and paper, or that jug, smashed—anything can be turned into a weapon. We live in a society, unfortunately, that has the idea that knives are what cause the problems. Knives are not what cause the problems. It depends on what the article is. I arrested a young fellow who was wielding a home-made spear of some description. It was a piece of metal can that had been cut and attached to a wooden pole. This guy was waving it around and threatening people with it. When I turned up he started waving it at me. It was clear to me that he did not know what he was doing, but you are not dealing with martial artists, in the main. We live in an ever increasingly dangerous society. Yes, there should be significant penalties for people who carry knives without lawful reason.

**CHAIR**—Is there a penalty?

**Mr Fenlon**—There is.

**CHAIR**—Do we charge many under it?

**Mr Fenlon**—No, we do not. We issue them with infringement notices under this legislation. We do not lock them up; we just fine them.

**CHAIR**—They get a spot fine, do they?

**Mr Fenlon**—Yes. While it is fresh in my mind, I would like to tell you of something that was related to me some months ago. A police commander—a superintendent—at a local area command where there were a number of fishing wharfs, apparently issued instructions to his police to go and issue infringements to the fathers, young men, and women who were fishing on the wharf.

**CHAIR**—Because they had fishing knives? My god!

**Mr Fenlon**—Because they had fishing knives and scaling knives. Apparently when he was questioned in relation to this he said, ‘Well let them fight it in court. Let them justify their reason for having it, in court.’ On the face of it I suppose that is legitimate, but it would lock up the court system.

**CHAIR**—That is not the intent of the law, anyway.

**Mr Fenlon**—No, it is not the intent of the legislation. The intent of the legislation is not to confiscate knives from people who have them for lawful purposes or who do not intend to use them in an offensive or threatening manner. Tradesmen carry Stanley knives. Do we arrest all tradesmen? This is how ludicrous it has become. It has become a chase for statistics rather than the application of the legislation in the spirit in which it was intended. It was intended to keep our gangs—those who demonstrate antisocial behaviour on a regular basis—under control and give us power to seize these objects, if they exist in any case. Under the Summary Offences Act there was a specific offence—it is rarely used now—of carrying a cutting implement. You could charge an individual with carrying a cutting implement if the person had committed another offence—whether it be offensive conduct or offensive language—when you arrested the person for antisocial behaviour. When you arrested the person for antisocial behaviour, or for any offence, you would conduct a search on this person. If your search located a knife or a sharp implement or an implement that could hurt somebody—and it was not confined to knives; it could be anything from nunchakus to knuckledusters—you charged them with an additional charge. The provision was there under the Summary Offences Act. I think this legislation is pretty much—

**CHAIR**—Would that allow you to break up unruly gang behaviour by an arrest under the Summary Offences Act?

**Mr Fenlon**—Yes. Most of these gangs use colourful metaphors in their speech when you approach them. That provides the basis, if you like, for an arrest or prosecution for offensive conduct.

**CHAIR**—I had some discussions at Scotland Yard in London, whereby it was said that the act of arrest is a useful tool in controlling street crime.

**Mr Fenlon**—Absolutely.

**CHAIR**—You believe that totally?

**Mr Fenlon**—Absolutely. It has been my experience, over 20 years, that where you have a large group of individuals—it does not matter how many, really—involved in antisocial behaviour, the action of arresting individuals is generally sufficient to disperse the remainder and send a clear message that, if you hang around in this particular vicinity and you continue to behave in this manner, you are looking at a blue taxi ride back to a police station.

That is the strategy I employed quite regularly. It worked. I saw police officers, who were my mentors and role models in relation to the application of legislation, use that. To clean up our local streets we did that. All you need is the legislative power to do it. It came under the Summary Offences Act as offensive conduct. You arrested an individual for throwing a bottle on the ground and smashing it or using language—whatever the case may be—and within minutes the situation was generally under control. It was diffused and you could send this person off on his merry way back to the police station and he was charged and went before the court.

**CHAIR**—If my mind serves me correctly, the Summary Offences Act was got rid of when Frank Walker was the Attorney-General.

**Mr Fenlon**—It was before I joined.

**CHAIR**—I think that was the period.

**Mr Fenlon**—It was replaced by the Offences in Public Places Act.

**CHAIR**—Yes.

**Mr Fenlon**—I think in 1986 they changed the legislation again and called it again the Summary Offences Act.

**CHAIR**—Is it the Summary Offences Act as we knew it previously?

**Mr Fenlon**—No. You have to understand that the previous Summary Offences Act was before my time. However, I have spoken to, and been trained by, police officers who used that legislation and they tell me it was wonderful in terms of its application. You could basically arrest anybody for anything—well, not quite anything!

**CHAIR**—I am not quite sure that is a good idea.

**Mr Fenlon**—Neither am I, but I am trying to say that it was much easier. It did not have to degenerate to a fisticuffs situation. But there are other dynamics involved as well. There are areas of complaints against police for assault, which go hand in hand. I found in the latter years of my service that police officers were more reluctant to take fairly swift and forthright action against individuals who were demonstrating antisocial behaviour, for fear of complaint.

**CHAIR**—For fear of complaint?

**Mr Fenlon**—For fear of complaint.

**CHAIR**—So this regime of fear of complaint became paramount, did it?

**Mr Fenlon**—Yes. It is a strange thing. A lot of general duties police, particularly younger officers, would discuss with me their options, after about two years of working in general duties. General duties was considered basically to be the bottom of the barrel for police officers because you had to deal with angry men and women. It was certainly the most unattractive area of policing.

**CHAIR**—Does general duties mean being on the beat?

**Mr Fenlon**—That is it. Basically you handle everything that the detectives do not want to handle. You handle the more mundane tasks like prisoner escorts and security arrangements—but a good generalist is worth their weight in gold.

**CHAIR**—In that trip I took, I visited New York and Los Angeles. I spent time with Mayor Giuliani and Commissioner Kelly and I talked with commanders of precincts. Certainly they said that the feet on the ground make the difference. They actually had a formula, I think, of two for every 1,000 people.

**Mr Fenlon**—If we had that sort of figure in New South Wales it would be terrific. Extra police is not the only answer. In fact, I would argue that it is not the answer. I would say that we probably have sufficient resources to do the job properly today, anyway.

**CHAIR**—What needs to be done?

**Mr Fenlon**—Police need to be made aware that they should not be afraid of doing their job. They need to be better trained in street policing. There is not enough education on street policing skills. As I had to, you have to rely on—and you should be relying on—experienced members teaching you the ropes. But it is not that. We need legislation that is not cumbersome and that works. It is far more effective to arrest somebody than to issue them a ticket, because it has the desired impact on other persons who are present.

**CHAIR**—For instance, I was amazed when Don Weatherburn brought down his figures a week before the last election. All the attention went on measuring the number of different types of crime and whether they had moved up or down a percentage point. They really had not moved all that much. But down the back of those figures, that did not get any attention and which was really much more interesting, was the fact that the number of prosecutions had dropped over three years by something like 12,000 to 14,000 and the number of warnings had gone up from 8,000 to 33,000.

**Mr Fenlon**—That does not surprise me.

**CHAIR**—They were just staggering figures.

**Mr Fenlon**—I said to a friend of mine fairly recently that policing has little to do with policing anymore. Policing is all about perceptions. It is not about getting your hands dirty; it is about being seen to be getting your hands dirty. We had a series of shootings in Sydney recently and something was done about it only when the information appeared in the *Telegraph*, the *Herald*, or was discussed by some talk show host. It is important that the senior administration is seen to be doing something about it.

**Ms PANOPOULOS**—In your opinion, is that issue of being seen to adequately police New South Wales driven purely by the police force, the government or a combination of both?

**Mr Fenlon**—It has to be a combination of both. Law and order is high on the political agenda everywhere. The government of the day picks the Commissioner of Police. It is not a system like the one in America where the individual happens to be voted into the position by the local community. That has its pros and cons.

**CHAIR**—That is only in some parts of the United States.

**Mr Fenlon**—That is correct. I suppose it all gets down to the question of how you measure the effectiveness of policing in New South Wales. Do we rely on the statistics gathered by the police force itself and which are then provided to BOCSAR, or do we measure it using something a bit more tangible? I have always said and believed that, if we are to do our job properly, there should be a five-year plan. In the first two to three years we should see a massive increase in the number of arrests and, more importantly, successful prosecutions at court. In the

following two years and thereafter, we should see a decline. In terms of the quality of policing and investigations, as arrests drop off, prosecutions should remain relatively on par with the number of arrests so we know that, when police officers do make arrests, they are getting successful prosecutions at court. But those two figures should then start to come down. That is what should be happening, and that is how I would measure the effectiveness of policing in New South Wales.

The majority of serious crime is committed by a fairly small percentage. You will always get your aberrations whereby you will have three or four homicides in a week and they will be completely unrelated, domestic violence related or whatever. You cannot forecast those things. But with the habitual offenders et cetera, there needs to be a complete review. Politicians are saying—and I would even have to agree with Bob Carr for once—that the judiciary, the justice system, has gone to hell. When you have individuals getting sentenced to 7½ years for premeditated homicide—that is, they have taken a gun into a service station, shot a young bloke, taken the money and run—it is frustrating for someone like me, who spent 20 years as a cop. It must be incomprehensible for the majority of the community to accept something like that.

**CHAIR**—Yes.

**Mr Fenlon**—That is where our problem lies. If we need to build more jails, we should build more jails—put them away. Our police, at the moment—because we have failings in the judicial system and because we have a significant degree of incompetence managerially within the police force itself—adopt this tack of throwing a coat of whitewash over the problem. Then, when a real problem does rear its ugly head, they look at it reactively and say: ‘Let’s react to it now. Let’s not worry about it until it rears its ugly head, but when it does we will drive the resources into it and we’ll look at it more closely.’ These shootings in south-western Sydney should not have happened. Something should have been done about the problem a long time ago. That is a fact. The intelligence in relation to these families should have existed. If it did exist, why wasn’t it acted on?

**CHAIR**—There seemed to be, coming out of the police area, an attempt to say, ‘This is just two families having a feud, and don’t worry about it.’

**Mr Fenlon**—I do not have access to all the information, but I strongly suspect that it is driven by other things. A family feud is fine—sure—but I do not believe it.

**CHAIR**—But there is going to be drugs, money and criminality.

**Mr Fenlon**—There has to be criminality attached to it in some way, shape or form.

**CHAIR**—Yes. Anyway, we have interrupted. Do you want to finish that statement?

**Mr Fenlon**—Yes, I will go on. In relation to the COP system and data entry, it is just like the promotions system. It is just another example of systems failure which, instead of being addressed, is simply being taken advantage of by the unscrupulous.

Issue 11: the apparent attempt by the New South Wales Police force to mislead the New South Wales Ombudsman. Mr Kinmond’s preliminary review of the police investigation into my

complaint recommended that the police force take steps to notify the Bureau of Crime Statistics and Research regarding the validity of statistics surrounding the Police and Public Safety Act as a consequence of the police investigation. In his response to Mr Kinmond, Assistant Commissioner Waites indicated that this had been done. According to Dr Weatherburn, however, through a third party I have been advised that it was not and that his office was not contacted in relation to the investigation and that it was not briefed—formally, informally or otherwise—in relation to the investigation or its outcomes, findings or recommendations. So Mr Waites has deliberately or otherwise indicated in his report to Mr Kinmond that BOCSAR has been advised. Who knows? It was wrong.

Issue 12: the failure by investigating police to act on an anonymous email sent to me on Sunday, 7 July 2002, at 11.25 a.m. Only five days after I was interviewed by Inspector Matthews and Acting Detective Inspector Shoebridge at my home, I received an anonymous email containing the capitalised word 'QUIT'. That was all. I did not immediately report it because I was not aware at the time that codes within emails can still be traced to service providers and that, through the identity of the ISP, the customer can be identified. In any event, on 23 August I discovered this. I attempted to contact Detective Inspector Matthews first but I could not get him, and I got onto Acting Detective Inspector Shoebridge. I told him what happened and he gave me an undertaking that he would do something about it, but nothing was ever done. Taken at its best, this is negligence on the part of the department for doing nothing in relation to an issue that I raised. At its worst, it is a clear indication of the degree of support provided by the police force to an internal police informant. No-one gives a shit; no-one cares.

In conclusion, I have found the police investigation of this matter to be substandard and wanting in terms of its veracity and integrity. I have found the review and the report of the investigation by the New South Wales Ombudsman, with some minor exceptions, equally unsatisfactory. However, having since met with Mr Kinmond, I consider he was not in possession of all the relevant information to report otherwise at the time. As a result of my submission, I again very recently met with Mr Kinmond. He advised me that my concerns are in the main being addressed by his office.

However, the report by Mr Kinmond has effectively rendered knife search and move-on data gathered by the police force in the last five years worthless. Data which has been utilised by the Bureau of Crime Statistics and Research, the government and the police force itself to formulate policy and direct policing resources has been found to be completely unreliable in all respects. It follows, therefore, that the success and effectiveness of Labor government policy in the form of the Police and Public Safety Act cannot and should not have been measured by the statistics gathered by the police force. Yet the Premier and various police ministers have done exactly that. Moreover, it is reasonable to assume that previous and current commissioners of police have, on the basis of the statistics, wasted significant financial and human resources in providing responses to that statistical data. Substantial quantities of public moneys have been wasted.

If the consequences of poor management were so significant that they were clearly identified as maladministration, why are the consequences for the managers responsible so inadequate? In this case, Waites finally conceded, under pressure from Mr Kinmond, to managerially counsel Superintendent Les Wales. Of course, the problem is that those outcomes were willingly accepted by the New South Wales Ombudsman in the resolution of the matter. Someone should have been held accountable in this mess. That is my view on the matter.

**CHAIR**—After finally getting the Ombudsman to look at it, he said—

**Mr Fenlon**—No-one got anything worse than a slap on the wrist.

**CHAIR**—'You were right in what you said about the stats, but we're just going to smooth it all over and cover it up.'

**Mr Fenlon**—They are saying it was an administrative fault.

**CHAIR**—And that they were all ignorant.

**Mr Fenlon**—They are saying they could not have been expected to know what was going on and that the young police involved in the input of the data did not know what they were doing. They are saying, 'We are going to address that now with the introduction of COPS2, which is a revised computer system, and everyone is being managerially counselled and they are going to be provided with education and training in relation to what they have done.' So, as far the police force is concerned, that is that. And as far as the Ombudsman is concerned, he has no choice but to accept it, because he is a bit like a toothless tiger—and I have said that to Mr Kinmond.

This investigation has confirmed my conviction that the police force cannot be trusted to investigate itself and should not be permitted to do so. This police investigation gives every indication of an internal cover-up. Entire lines of inquiry were ignored or superficially addressed and the outcomes for those involved speak for themselves. Whilst there can be little doubt that the investigation exposed managerial incompetence, which through its findings and recommendations we also find Mr Waites apparently endorsing, it failed to find unethical, improper or corrupt conduct on anyone's part. It failed to find it because the police force did not go looking for it. That concludes what I have to say, and I am happy to answer any questions.

**Mr CADMAN**—You have posed a problem, and I want the benefit of your experience. It seems to me that we either have too much political tampering with the police force, which encourages senior managers to want to please their political masters and play games instead of running a police force, or there is not enough political interference, which is needed to correct some of the anomalies, injustices and incidences of nepotism that take place.

**Mr Fenlon**—You are correct.

**Mr CADMAN**—Which is it? Is it too much, or not enough? I hear that Ted Pickering started it all.

**Mr Fenlon**—Either way could effectively address it, but it depends on who is appointed as head of police. You saw what happened under Minister Costa's leadership. Even though it was personally disappointing for me that he did not stay in that portfolio—and I have my own opinions in relation to the man as a result—he could not be accused of at least not attempting to do the right thing and directing that certain action be taken. We had a minister who, if he did not step outside the boundaries of involvement in operational matters, came very close to it. But that is what was needed at the time. It is still needed.



You could say that we need more political involvement—certainly, if you have someone who is prepared to do something about it. Similarly, there is a case for the reverse but it depends, again, on the man who is in charge. If you have a commissioner of police who is strong and not afraid and who has the legislative power to do what is required, then he can look after the show himself. He does not need to please anybody. No-one is his master. He can do what needs to be done in terms of policing. But not everyone is a Bratton. I had a telephone conversation last month with Mr Ross, Chief of Staff to the Commissioner of Police. I called in relation to another matter but we discussed the commissioner's reluctance to terminate the employment of senior officers who were found guilty of unethical or improper conduct. The remark he made to me—that the commissioner cannot sack some people whom he wants to sack—smacks of a situation where either it is a reluctance on the part of Ken Moroney to do the right thing or his hands are tied in relation to it.

In your recommendations at the end of the day, you should perhaps consult with Moroney and see what he needs. Or perhaps Moroney should go to Minister Watkins and say, 'I need to get rid of these people, but the legislation is crippling me and I can't do it,' or, 'I'm getting too much opposition from the police association,' or this or that, but it needs to be sorted. Certainly Superintendent Aust gave me every indication that Ken Moroney is rather impotent in relation to the dismissal of individuals whom he wants to sack. You can have a man, I suppose, of integrity at the top but he cannot do what he needs to do because of the legal shackles in place. You need honest men and women.

**Mr CADMAN**—But, surely, under those circumstances a manager will park people in positions which make them irrelevant?

**Mr Fenlon**—We have a phrase for them. We call them 'corridor creepers' or 'corridor superintendents'. They are pulled out of the local area commands and are put in these obscure administrative positions for a number of years. Generally, they re-emerge later on, purged of whatever they have done, with a fresh, clean shirt on and they start again. There are still plenty of those people in the police force wandering around headquarters. But the answer is simple: if someone makes a major foul-up you sack them. It is simple. You see it in private industry all the time—a new chief executive officer is appointed.

**Mr CADMAN**—I will come to the point that you were making earlier and it relates to my first question. What are the processes that have led to the restriction of strong management in the police force? Who has frightened police managers off their course of action? Peter Cosgrove is not frightened by government or by the public.

**Mr Fenlon**—No, he is not. Peter Cosgrove is quite a remarkable man. I have read a little about him: two tours in Vietnam, I believe, on the front-line. He is a soldier's soldier. And if you have faced enemy fire, you are not going to be concerned about some rhetoric that someone might throw at you. You know what has to be done and you go and do it or you approach the people who can do it for you. It does not work that way in policing.

**Mr CADMAN**—What is happening in New South Wales?

**Mr Fenlon**—It does not work that way in policing. The military culture is different from the policing culture. The policing culture, managerially, is all about promotion. It is all about

grooming oneself for the next rung up the ladder. You do that by providing rubbish statistics and coming up with ideas that are rarely implemented in terms of development programs. A good one is to write a book. You do everything except work the streets; you do everything except come up that way. Become an accountant; get a degree—anything and everything—but stay away from the hard yards, and for Christ's sake don't attract complaints into your local area command. Keep your complaint numbers down.

**CHAIR**—So there is a real complaint mentality.

**Mr Fenlon**—Everything has to be a bed of roses. It has to smell sweet and look sweet.

**CHAIR**—For heaven's sake, if you are a policeman and you are dealing with a criminal element, you have to expect complaints because they are going to try and make life difficult for you, aren't they?

**Mr Fenlon**—Of course you do. It is part and parcel of it. I used to say to my younger police, 'You're going to upset somebody. You're going to attract complaints if you're going to do your job properly.' They would say, 'Why? They told us at the academy that if we do the right thing, we won't attract complaints.' I said, 'No, that's not the way it works. The nature of your business is that you're going to upset somebody. You're either going to upset the victim by not arresting the alleged offender or you're going to upset the offender by arresting him. Somebody is going to be upset at the end of the day.' I said, 'You can't go in there and act like a mediator and sort the problem out and everyone goes away happy. That's not the reality of life in relation to policing.'

**Mr CADMAN**—To what extent do you think the criminal element or people on the fringe of the criminal element have been able to influence public opinion, through the political process, the media or some other method, to go soft on crime?

**Mr Fenlon**—The handcuffs went on policing a long time ago in relation to this perception that all police are crooks, all police beat people up, all police are involved in drug deals—that we expect this of our police. This is the perception of police in New South Wales. The PIC does nothing to improve our image by exposing the fact that young female police officers over on the eastern side have been taking recreational drugs for the last God knows how long.

**CHAIR**—That is where I get very angry: they are not recreational drugs; they are illegal drugs—

**Mr Fenlon**—They are illegal drugs.

**CHAIR**—and they have committed crimes. And we would like them weeded out, thank you very much.

**Mr Fenlon**—Absolutely, but the thing is, that can be done without the public expose that goes along with the PIC. In fact, these people have left. If the value of the exercise is that it discourages other people from doing the same thing, I would say to you that you are wasting your time, because these people have already come into the police force with this mindset.

**CHAIR**—So why aren't they weeded out at the time of recruiting?

**Mr Fenlon**—Is there any drug testing going on at the police academy?

**CHAIR**—There should be.

**Mr Fenlon**—Is there any psychological testing going on at the police academy?

**CHAIR**—Is there none? No? That is a joke.

**Mr Fenlon**—It did not exist for me either. Most police officers are good men and women.

**Mr CADMAN**—They are.

**Mr Fenlon**—Most police officers join the job for the right reasons—because they want to be of some service to the community and the public. No good police officer wants to work next to a drug addict. I certainly do not.

**CHAIR**—When we recruit for the Defence Force, they certainly have quite rigorous psychological testing.

**Mr Fenlon**—Rigorous examinations—psychological and medical examinations—are carried out on Defence Force personnel.

**CHAIR**—Absolutely, and then random testing.

**Mr Fenlon**—But we give them firearms, responsibility to enforce legislation and we are coming into our local community. It defies logic. Whatever needs to be done to straighten it out, needs to be done. You need the right applicants. You cannot let the political imperative, which is a matter of saying, 'We're going to give you 2,000 extra police in three years time,' lower the standard for applicants to the police force. And that is what has happened. We do not care who we put the blue suit on; if you pass the test, you are told, 'There is the uniform, there is the gun, out you go.' We can say in parliament, 'We have delivered 2,000 additional police over the last term of government.' It is just folly. I would rather have 50 good cops than 500 that are really not worth the money we are paying them. It is ridiculous.

Statistically it is borne out. When I was a supervisor at Blacktown I used to be responsible for what they call 'workoff' administration, which is the workload for officers. You would check how many arrests were made, what the prosecutions were and how many information reports the individual officers did. When I looked at members of my team and members of other teams, the reflection was that 20 per cent of police at the police station did 80 per cent of the work. I raised that at a meeting with Les Wales, the superintendent there at one stage and was told, 'We can't do anything about that. You know who your performers are. They carry the can and that is all there is to it.' I said, 'Hang on a second, we should be doing something about it and we should be reallocating cases from these people to these people, in order to drive them up.'

**CHAIR**—That is a complete abrogation of leadership by Wales, isn't it?

**Mr Fenlon**—It is not just Les Wales, it is everybody. They do not care. There is burnout, you have very high attrition rates, low retention rates, high rates of sick leave and stress and these occur with officers who are basically driven into the ground. They were doing well in there, initially. I used to put in 16-hour days as well and you would not claim the overtime because you wanted to do your job. You wanted to put the bad guy away. You did not care about the hours. Your missus cared when you were late home but you wanted to do your job. It hurt me to see so many good people come in, burn out after four or five years and say, ‘I have had enough of this.’ When they wanted to go the extra yard and they put in their claim for overtime, you signed it knowing that it had to go to Wales or somebody like him who may very well refuse it or rake you over the coals because you have authorised the overtime because the officer was out there locking a bloke up. It is not about policing any more; it is all about the image of policing.

**Mr CADMAN**—Who do you think started this process of run-down? What does the culture say? Where did it start to go wrong?

**Mr Fenlon**—It started to go wrong when they started making local area commanders responsible for their own budgets—the decentralisation of fiscal management. That is when it started to go wrong. I am not saying that there should not be budgetary constraints of some nature but when they started to make individual commanders responsible for the administration of their own budgets that is when the wheels started to fall off the machine.

**CHAIR**—Is that because they were not competent to do that and it was not part of their training?

**Mr Fenlon**—It is not that. You had circumstances where some local area commanders were getting a lot of money and were able to, because their workload did not justify it, put on training courses, buy additional equipment and fit their stations out wonderfully. Then you had places like Mount Druitt, Blacktown, Fairfield, Cabramatta and what have you where it was just dreadful. You could not find locker space and you could not afford to buy a locker for the new copper that came. Before then it was more about policing—locking up the bad guy. Now it is about managing the budget and giving the appearance that crime is being addressed. There are fewer operations.

**CHAIR**—Clearly what we have lost, largely because of that promotion scam that we have dealt with before, is a lot of good policemen.

**Mr Fenlon**—Absolutely.

**CHAIR**—Was it because they were the victims of that fraud?

**Mr Fenlon**—Absolutely.

**CHAIR**—What would it take to get you, or some of the others who have left, back?

**Mr Fenlon**—For me personally, the dismissal of about 90 local area commanders and deputy commissioners. I could not work for these people now, knowing what they are.

**CHAIR**—Do you have a little list of who they are? I will not ask you to name them but I would be interested to see a list.

**Mr Fenlon**—It is not all of them. They are not all bad men or women but they are all cowards because they all knew what had gone on with the police force in the last eight to 10 years, prior to the administration of Peter Ryan, and not one of them had the guts to say or do anything about it.

**Mr CADMAN**—Yes, but is that because Peter Ryan was finding political favour and he appeared in the eyes of the media to be doing all the right stuff? He was a bit of a hero, was he not?

**Mr Fenlon**—Peter Ryan was basically a show pony. I applauded the idea of his selection. I thought, ‘This is brilliant; this is terrific—someone who is not connected in any way with the internal culture of the New South Wales Police force coming in, not being fooled or coerced by certain factions within the senior executive.’ I thought this man would do the job. He appeared to be competent. Everything that we were being sold about this man smacked of sharp, effective action. I thought it was a brilliant idea. And if he had turned out to be that way, I would have gone over broken glass barefoot for him.

**CHAIR**—So you are saying that there was a leadership problem.

**Mr Fenlon**—He was not a leader. He was not a police commissioner—no way in the wide, wide world. He was a fraud. He accelerated, if you like, the process of the cancer.

**Mr CADMAN**—Can you understand, though—and I am not defending Ryan or the people who appointed him—that from our perspective a person like that, as best we can detect, gives all the appearances of being competent and capable and of being someone who will drive the thing ahead the way we, as political decision makers, would like it to go? We—or ministers, or the selection team—possibly could have been fooled just as much as you were.

**Mr Fenlon**—Absolutely. I suppose you have to look at the selection processes—at who was spoken to. I am not likely to employ you in a job unless I speak to your previous employer.

**Mr CADMAN**—That is right.

**Mr Fenlon**—And if you were a supervisor there, I would speak to your employees too, to your immediate subordinates, to get a little bit of feedback. I do not think people did sufficient research on Peter Ryan.

**Mr CADMAN**—Do you think they looked for a quick fix?

**Mr Fenlon**—I think they did. I used to watch a show, when I was a child, called *Dixon of Dock Green*, which was all about a London bobby. Everyone has this image of the London bobby being impeccable, with a wonderful reputation; the cop around the corner; someone you can rely on; someone who is steadfast—all of those wonderful qualities that we all aspire to and like to see in the police. I think that is what Peter Ryan represented to a lot of people here. I think he perpetrated a brilliant fraud and that the selection process was not rigorous enough. It could

have been a little bit more in-depth. Certainly I have heard on the grapevine that there was, on his appointment, some giggling in the Home Office. I do not know. I am not sure. All I know is that a catastrophe has come about within policing in New South Wales as a result of his appointment and his subsequent hold on the position for the number of years. He destroyed the New South Wales Police force.

The difficulty I have with the current administration is that the current Commissioner, Ken Moroney, was the Senior Deputy Commissioner at the time. He should have seen it. I believe he did see it. I think Jeff Jarratt did, too. I think Jarratt was content to let him destroy the police force because he saw himself as a contender for the crown. My biggest disappointment, I suppose, is Mr Moroney. He is supposed to be, according to everybody, a reasonable and decent man. He was Senior Deputy Commissioner of Police, the second most senior police officer in the state. He did nothing. He let it happen.

**Mr CADMAN**—Looking at it from a management point of view, how does it appear, or how successfully can you spear your superior, if you are in his position? Are you giving the appearance of being a spoiler?

**Mr Fenlon**—I have called him a fence-sitter. I suppose within that era in police headquarters that was the safest option. You could not blame a man for taking that position. Ryan had a reputation for dismissing people who did not agree with him or whom he perceived to be a threat or disloyal. I would say with some degree of certainty that, had Ken Moroney gone to the minister, the Premier, the press or the PIC, he would have been sacked within days of doing so. The fact that the Senior Deputy Commissioner of Police had been sacked by the Commissioner of Police for providing information in relation to managerial incompetence and gross maladministration would have put him in better stead later on. Had Ken Moroney done that, I would not be in the situation I am in today. I would have been happy to go to work for Ken Moroney.

**CHAIR**—Basically, if you had strong leadership back and you had confidence, you would still like to be a serving policeman.

**Mr CADMAN**—You are saying some really important things about the selection process from a political point of view and the way in which we need to conduct ourselves. I think you are saying some important things about the management style for senior administrators charged with responsibility for controlling, on behalf of the community, criminal elements in our society.

**Mr Fenlon**—Correct. There needs to be—

**CHAIR**—That's terrific.

**Mr Fenlon**—Sorry, ma'am: you can take the man out of the police force but you will never take the policeman out of the man. My police career is finished. I could not go back to work for these people. There are two reasons. The promotion system has made it impossible.

**CHAIR**—Is it still functioning that way?

**Mr Fenlon**—The process is still much the same. It has gone unchanged. I spoke to Geoff Schuberg some months ago in relation to the recommendations of the investigation that was set up under Costa and he is not encouraged by it in any shape or form. There has been too much resistance to change by the Police Association, the New South Wales Police itself and even the ministry that form up the tripartite committee. Real reform within promotions is not likely to occur in the near future and I do not see the situation improving. In fact, it has not improved significantly. You are still getting fairly junior and inexperienced police operationally getting appointed to senior operational positions and supervisory positions. We should expect that well into the future because dinosaurs like me are leaving.

**Mr CADMAN**—You say Peter Ryan started the process. To wind up, I would like to identify how you deal with the influence of the loosely described civil libertarians. I think some of them have a second agenda—they really want to support a criminal element or they are influenced by a criminal element. How do you cope with that sort of criticism? Should you have to?

**Mr Fenlon**—As an operational police officer you need to be in a position where your actions come under scrutiny and should be available for scrutiny. It is too easy for civil libertarians to generalise, it is too easy for all of us to generalise, in relation to police going overboard or stepping over the mark.

At the end of the day you have got to look at the situation. You can take on board what the civil libertarians say—and, believe me, I am a great believer in one's rights and liberties, and they need to be protected. But at what cost to the greater community? When you start looking at the rights of individuals, at the expense of the welfare of the whole, then a logical person would say: 'This does not make sense. How can we allow this sort of conduct to continue within our society because we have to protect the rights of the individuals to this degree?' As they say, the good of the many outweighs the good of the few—that is my personal opinion—by so many watchdogs. This fear that police have got, that policing embodies now, is about doing your job and then drawing complaints; about facing possibly criminal prosecution and dismissal and having to finance your own defence counsel; about putting not just your life at risk but your home and the welfare of your family, of your wife and your children, in order to do your job and then facing a complaint or an allegation of assault or whatever and being prosecuted. These things are working on the minds of individuals.

**ACTING CHAIR (Mr Cadman)**—It is too much to ask of any individual.

**Mr Fenlon**—These are constables of police on about \$40,000 a year. I do not think they are not getting paid sufficiently or compensated for the risks that they are required to take. So you either remove the risks or you give them more bloody money. It is simple. You remove certain aspects of the risks or you safeguard them to some degree. Policing—general duties, anyway—is, in the main, about getting in and down and dirty with criminals. It means putting up your dukes and fighting. It means taking out a baton and belting them, at the end of the day. Somebody has got to do it.

**ACTING CHAIR**—Yes. Mr Fenlon, those are a great few words to finish on. If you are happy, we will have a break now. Thank you.

**Proceedings suspended from 11.17 a.m. to 11.36 a.m.**

**HICKIE, Professor Ian, Executive Director, Brain and Mind Research Institute**

**CHAIR**—Welcome. Do you have any comments to make on the capacity in which you appear?

**Prof. Hickie**—I am also the immediate past CEO of Beyond Blue, the national depression initiative, and remain a clinical adviser to that organisation.

**CHAIR**—I was very impressed when I met you at the breakfast on depression. I thought you had some really tremendous things to say which were of interest to us. We have invited you because of that expertise, and I note that you have provided the committee with an article, *Cannabis and mental health: more evidence establishes clear link between use of cannabis and psychiatric illness*, published in 2002. It being so moved, we accept this article as an exhibit in the inquiry. I now invite you to make an opening statement.

**Prof. Hickie**—The issues I would like to highlight to the committee are a number that face Australian society more generally. The issue that I am most concerned about is the increasing rate of psychiatric illness amongst young people in Australia and its long-term consequences. My work in clinical psychiatry and my work with the public health body involved in Beyond Blue seek to make the community more aware of the extent of these problems, the extent of the disability they cause and the effect on people's lives on an ongoing basis—the extent to which they contribute to educational failure, social dysfunction, the potential for crime and their contribution to other major social issues that we face. In doing that, we have tried to highlight two things. One is that the rates of common mental illnesses such as anxiety and depression and related substance abuse are on the increase in younger people in our society. There has been a clear change in the last 50 years. By contrast, the mental health of older people has improved during the same period of time as their physical health and social attitudes have changed. But we are confronted by the social and epidemiological significance, the public health significance, of increasing rates in younger people. At this stage, 60 per cent of all disability costs in Australia for 25- to 44-year-olds are explained by mental disorders.

**CHAIR**—Is that right?

**Prof. Hickie**—Seventy-five per cent of cases of the onset of mental illness are in the 15- to 25-year-old age group. It really matters what happens in the late teenage and early adult years. Needless to say, if we want to prevent many of these disorders—and our goal is to prevent this terrible life course that many people encounter—we need to focus on the risk factors, the things that may be increasing the rates. Most of the evidence to date has focused on changes in social roles and other social factors, but one of the issues that are clearly in the public debate is the role of drug use during those critical periods.

**Ms PANOPOULOS**—Professor, just on that point, I have recently seen some graphs from Treasury's Intergenerational Report which was produced last year. One of the most disturbing graphs that I observed was one relating to males aged from 25 to 44—roughly those years—and which showed a decreasing proportion of men in that age group in the work force. By that I mean not only employed but actively seeking employment. So it showed a decreasing number of



men in that age group being potentially in, or part of, the productive work force—they were permanently being taken out. That was quite disturbing to me because, at a time when we are getting healthier, we are spending more and more on health, and there seemed to be what one would have thought a very healthy age group being taken out.

**Prof. Hickie**—You have raised a really fundamental issue about what we spend on health services in Australia as distinct from the health burden in Australia, and the increasing disparity between the two. Health services, by their nature, spend most of their money on older people with physical disorders and as people approach death. That is the nature of what happens in acute health services and chronic health services.

**CHAIR**—We spend the most in the last two years of our lives.

**Prof. Hickie**—That is right.

**CHAIR**—But I have never been prepared to predict which are the last two years of my life, and I have never asked it of anyone else either!

**Prof. Hickie**—If you look at the actual evidence about that, it is exactly what happens. So health services spending strongly tracks age and age related illnesses. What actually happens, though, in disability is not necessarily the same. So the point you have raised is exactly true—males' and younger people's participation is strongly affected, but not nearly so much by their physical health. Our younger generations are more physically healthy and more educated than they ever were. But their mental health has declined over the last 50 years, and mental health leads to lack of social participation, lack of completion of education and training and lack of participation in the work force.

With respect to these current figures about falling participation by men, obviously there are population health reasons about the number of young people, as the distribution of the age range in our society changes. But what is important, and it is something that is largely neglected by health services, is the number of people who actually have common mental health problems. That is the reason that they do not participate: they have had the onset of anxiety, depression or a more significant disorder, often complicated by substance abuse, between the ages of 15 and 25; they have not completed education; they have dropped out of work early and, in our system, do not receive health services. Men do not come forward. If we look at rates of treatment, for example, of anxiety and depression in Australia, less than one in six people receives effective treatment. That is because about half do not attend for treatment; they do not feel the medical services are appropriate. The other half talk about the stigma and they talk about the inadequacy of the treatment system. So we do not do a lot at the moment to prevent the onset of these disorders and, when people have the onset, we do not do a lot to treat them. The end result is in disability costs. One of the reasons that we developed a national mental health strategy in 1992-93 was because of a realisation by the Commonwealth that it may not have been paying for the health cost but it was certainly paying for the disability cost.

**Ms PANOPOULOS**—Professor, with all your expertise and having regard to your background, would you say that a significant contributing factor to that permanent decrease in the rates of male participation in the work force between 25 and 44 is attributable to mental illness arising out of substance abuse?

**Prof. Hickie**—I would agree absolutely with the first part. There is clear evidence that the overwhelming health contribution to the lack of participation by the age group is due to mental disorders. The key issue then becomes: what is the role of substance abuse within those mental disorders? Clearly, there are two issues. One is the onset of mental disorder, complicated by substance abuse—mental disorders made worse, and their severity, course and outcome, by substance abuse. It is a very important issue for men because men do not seek care. Most of the evidence suggests that the more severe their psychological disturbance, the more they use substances on an ongoing basis, and that does not relieve the problem; it makes the problem worse on an ongoing basis. This is reflected in most of the clinical evidence. I think that issue is largely resolved within mental health. Mental health problems are complicated, made worse, the symptoms made worse, the outcomes made worse, by the current use of substances. Of course, most people with mental disorders do live in the community on an ongoing basis and have ready access to substances in the community. They do not attend health care, so the ongoing effect of that is a worsening mental health situation.

Over the last decade or two there has been a great deal of debate about whether the substances actually cause the onset of the mental disorders in particular. That is why I have brought along a series of articles from the November edition of last year's *British Medical Journal* reporting on a series of major studies which, in my opinion, put to rest the argument about whether cannabis in particular is a significant risk factor.

**CHAIR**—And?

**Prof. Hickie**—It is. There is unequivocal evidence that it is a risk factor. In medical terms, people often confuse what a risk factor is. For example, we clearly recognise smoking as the major risk factor in lung cancer. It does not mean that everyone who smokes will develop lung cancer, and it does not mean that everyone with lung cancer has necessarily smoked. It does mean that if we reduce smoking rates we will reduce lung cancer in our society. We had a generation where smoking was common. Going back a generation, about 70 per cent of adult males smoked. Now it is only 20 per cent. Altering something that is common and a risk factor has dramatic effects. We have seen the effects of reducing smoking rates: rates of lung cancer have gone down.

In that sense, we now have clear evidence of cannabis as a risk factor in psychosis and emerging evidence of cannabis's place as a risk factor in common forms of mental illness like anxiety and depression. Now we see more interest in determining how much of the substance is harmful, how often, how it happens and how it works, but I think the wider public health issue is that there is clear recognition within the medical profession that the argument about whether it is a risk factor or not has largely passed.

**CHAIR**—It might have scientifically. You have clearly done the work, and we accept that, but there is an enormous number of young people out there who have been fed a diet of being told, 'It's okay; it's a recreational drug. It goes through the body and it doesn't hurt you.' How do we turn this around?

**Prof. Hickie**—You are raising a very important issue. I think, now that the evidential side—it being a risk factor—is resolved, the education and public messages which flow from that need to identify it as a risk factor. For a generation we have told young children that cigarette smoking

and alcohol use are clearly risk factors to their health, although alcohol is actually more complicated than that in terms of its risk benefit ratio.

**CHAIR**—It is very good for your heart.

**Prof. Hickie**—For cigarette smoking it is very clear-cut. Two generations ago it was considered innocuous and it was used by most adults. Now we have identified it as a risk factor and we have dramatically changed our social practices around that substance.

**CHAIR**—That is fine, but cigarettes do not scramble the brain. I have never seen anybody commit an act of burglary under the influence of tobacco. Its effect usually takes quite a long time and it is legal. In my view, people who wanted illicit drugs legalised wanted to make alcohol, tobacco and illicit drugs all sound the same. They wanted to say, ‘We have fixed this by regulation; ergo, you can have the rest.’ We cannot. Society cannot allow the destruction of the brains of young people.

**Prof. Hickie**—I agree with the chair that the direct effects of cannabis, like alcohol, are immediate; they are not 30 or 40 years off, and they effect the thing that matters most to your participation in society, which is brain function. What has surprised a lot of health authorities and economic authorities—along with the disability figures you were talking about earlier on—is the recognition that mental disorders contribute so much to disability. In fact, 27 per cent of all disability costs in Australia are due to mental disorders; it is the largest category. If your brain does not work, you cannot complete education and training, you cannot maintain a family and you cannot maintain your employment, as distinct from a lot of other areas of physical disability. In disability weights and comparisons worldwide, people with chronic depression are often compared with people in wheelchairs. That is very surprising to the general public. They ask, ‘How can it be that disabling?’

**CHAIR**—Actually it is more.

**Prof. Hickie**—Our society has changed a lot to make life for people in wheelchairs a lot easier—to allow them to come to work and to participate. We have removed a lot of the barriers. If your brain is not working, you are not concentrating, you are not remembering and you are not reacting to social cues, you are very unlikely to hold a job, you are very unlikely to complete education or training and you are very likely to get into difficulties associated with poor social judgment associated with disturbed brain function.

**Ms PANOPOULOS**—Are you able to comment on the levels of cannabis use and whether they have different impacts? For example, can the use of cannabis a couple of times have an impact, as opposed to regular weekly or daily use, or does that depend on the individual person?

**Prof. Hickie**—When looking for evidence of cause, we often look for so-called ‘dose response effects’. It is plausible that a substance will cause more of a problem the more you take it. In all the studies and some of the material that I have published there is a clear dose response effect. How much clearly does matter. That has led to a lot of interest in public health in the sense of how much is safe versus how much is a problem. On the medical or evidential side, that is focused on clearly defining daily use as harmful and looking at the proportion of people who are using it at least on a weekly basis, as distinct from having ever used the substance. Most of

the debate at the moment is around what constitutes harmful use. Clearly, daily use constitutes harmful use, and there is clearly a dose response: the more you use and the more often you use, the more your chance of developing a psychiatric illness goes up.

**CHAIR**—And it is cumulative?

**Prof. Hickie**—Whether it is cumulative over a lifetime is harder to work out. To take the second side of the argument, the number of Australian teenagers who are using at this level is increasing. So the substance is being more widely used by everyone. Current estimates suggest that 50 to 60 per cent of Australian teenagers are using or have used the substance. Probably around 10 per cent are using on a weekly basis by the age of 17. We probably have something like 10 per cent of the population engaged in what the medical profession would accept as potentially harmful patterns of use.

**Ms PANOPOULOS**—Would it be true to say that the predisposition of certain individuals would mean that they are mentally harmed through using cannabis a couple of times?

**Prof. Hickie**—It is definitely true that it is a risk factor. One looks at what risks the individual brings into the situation—their genetics, their past experiences and what else they are doing—in addition to their exposure to a substance. We do not have a way yet of working out, at an individual level, whether for some individuals smoking or using an illicit substance once or twice is enough to tip them over. We do not know that at an individual level. We cannot say that for an individual who smoked three times, this is the straw that broke the camel's back.

**CHAIR**—But equally, we cannot say it is safe.

**Prof. Hickie**—That is absolutely true: neither can we say it is safe. There may be some individuals who are so genetically predisposed and who have such a cumulation of other risk factors that the addition of a small amount of another risk factor may be the straw that breaks the camel's back.

**Ms PANOPOULOS**—Someone might say to me, 'Stop being paranoid about cannabis; I only take it once in a while. It is okay.' What do I say to that person?

**Prof. Hickie**—In a public health sense, we are saying to everyone that we clearly need to relabel cannabis from a recreational drug to a harmful substance for the population as a whole. But at an individual level we do not know. When a person says, 'It is safe for me to do that,' we say, 'Actually, we do not know whether it is safe for you as an individual. We know that the more you use of the substance, the greater your risk of developing a significant mental disorder as a consequence.' That is true of a lot of risk factors that we understand in society. So we are not yet at a level where we can tell you your individual risk of developing the specific illnesses I am talking about if you engage in another behaviour.

**CHAIR**—Professor Hickie, today has become a very busy day. If it is okay, I need to adjourn for half an hour and come back. We will continue then because I have so many questions. I think the work you are doing is fantastic.

**Proceedings suspended from 11.53 a.m. to 12.31 p.m.**

**CHAIR**—Thank you for allowing me that short suspension. Professor Hickie, do you want to continue with the things that you were saying because you have so many good things to say.

**Prof. Hickie**—I am not sure where we stopped.

**CHAIR**—We had just determined that certain people have merged the image regarding alcohol, smoking and illicit and illegal drugs on the basis that if you can handle some by regulation, ergo you can handle the rest.

**Prof. Hickie**—My response would be that, in terms of mental illness, each of the three substances is quite different. Tobacco has a lot of physical health consequences but very few mental health consequences except in people who try to cease smoking. We now recognise the onset of anxiety and depression in ceasing smoking, particularly in the first month, as a reason that many people cannot quit. It is largely not addressed. Alcohol is a complex issue in terms of mental and physical health. Alcohol in small doses has both physical and mental health benefits but in large doses has detriments so it poses a much more complex public health argument. For cannabis, I think you quite rightly highlighted that the principal adverse effect is in the mental health area. The physical health consequences are somewhat unresolved as to whether smoking cannabis leads to increased cancer rates et cetera, but in the mental health area I think the issue is resolved about adverse effects and that they are immediate. The second issue we were addressing was whether there is some level of safe use.

**CHAIR**—No.

**Prof. Hickie**—No. The answer to that is at an individual level. We cannot say to an individual that there is a safe level of smoking. The other issue of genuine concern is that rates of use in our society are headed in the opposite direction to tobacco use. Tobacco use is generally going down; therefore fewer people are exposed and, for the population as a whole, there are less adverse consequences. But rates of cannabis use have increased for several generations and are now at very high levels.

**CHAIR**—And for very young children with 11 being the starting age.

**Prof. Hickie**—We have not yet commented on a second factor arising from what is known as the Dunedin longitudinal birth cohort study. That study suggested that exposure before the age of 15 was particularly relevant to the onset of severe mental problems after that. So that study showed that it is not only how much you smoke but also the age at which you are exposed. It is important to say, as with all medical research, that that needs to be shown in other studies, but certainly, across those studies, there is a suggestion that the age of use is a factor and that is biologically plausible in terms of the way in which the brain develops. The brain undergoes its final phases of maturation in late teenage years and that is when we have the onset of, in particular, schizophrenia but also associated severe mood disorders and anxiety. If substances were to interfere in that particular period then they may change critical aspects of brain maturation and lead to particular illnesses. So the notion is also that if you can protect exposure to the substance until the brain is fully mature then you may well also reduce some of the adverse consequences. I would say that in terms of public health, the goal would be to reduce the amount of total exposure in the society to the substance just as we have done with tobacco and to recognise it as a risk substance.

**CHAIR**—But we have to make a distinction between legal and illegal. If you do not you get the soft harm minimisation message, which exposes more and more kids to it because they think it is okay.

**Prof. Hickie**—My position would be that the public health issue is definitely to reduce the amount of total exposure. What are the mechanisms of that through legality versus illegality? What we know in general public health terms is that the more available a substance is—

**CHAIR**—The more they use it.

**Prof. Hickie**—the more likely people are to use it. The more attitudes are that it is recreational or that it is not of harm or danger to society the more likely it is to be used. So attitudes to its use matter and availability matters; therefore, societies have choices about issues such as legalisation, taxation, points of sale et cetera. We know that, for all substances, the more easily available you make the substance the more likely it is that people will at least be exposed to the use of that substance. From a medical point of view, generally when one recognises that a substance is harmful one tends to look at all of the available methods—educational, legislative, taxation, points of sale et cetera—that contribute to reducing the chance that individuals will use the substance.

**CHAIR**—The illicit drugs form of sale is really a form of pyramid selling. We have banned pyramid selling for ordinary, legitimate commerce. But that is the base of drug usage: the more distributors you have at the base of the pyramid feeding the profits up to the top, the more there will be. So the whole thing is illicit, and more and more things feed off it.

**Prof. Hickie**—In public health terms, clearly legislation or making a substance illegal is one option, though the history of substance use is such that it is unlikely that that option on its own will control a particular substance. So we do have illicit substances. We have had prohibition of alcohol and we still have alcohol use. So that is one option. I think what we were discussing is that there are a range of issues—

**CHAIR**—But, again, every society has a social lubricant. Once you introduce competition for it, usage increases—like every other product. We have chosen alcohol. That is the social lubricant for us, and it has a whole lot of things about it such as blending with food and some good aspects such as testing, competition and all that, which have nothing to do with the use of illicit drugs.

**Prof. Hickie**—I think you are quite right to separate out that alcohol, tobacco and cannabis, for example, are all quite different in their immediate and long-term effects and that they are different in the pattern of their harm or benefit. I think the issue with alcohol is complex because of social attitudes and because there are physical and mental health benefits in low usage although there is considerable harm in high usage. The issue with cannabis is that we have evidence of harm—

**CHAIR**—Full stop.

**Prof. Hickie**—at low dose. If you accept that argument, then the worrying thing in Australia has been the number of people who, particularly over the last generation, have had increased

exposure. Most estimates in most Western societies are that we have moved from around 20 per cent of teenagers using it 10 to 15 years ago to patterns now of around 50 per cent of teenagers using it. So there has been a dramatic increase in the number of teenagers, despite the illegality, who are being exposed.

**CHAIR**—Yes. We have said that it is illegal, but all the messages are soft.

**Ms PANOPOULOS**—To what do you attribute the particular increase in recent years? It is not as if the attitude to cannabis has changed significantly, until recently. So what is it over, say, the last 10 years that has led to this increase, in your opinion?

**Prof. Hickie**—There are two factors. Again, I know the chairman does not like to retreat to smoking, but we know our best messages from smoking are that the best predictor of whether you will be a smoker is whether your parents smoke on an ongoing basis. So what we have is a generation in the 1960s and 1970s who started to use cannabis quite commonly. They are now parents of children, and their perception is largely that it is a recreational and safe drug.

**Ms PANOPOULOS**—So we can blame the baby boomers.

**CHAIR**—I have to say that I said no because it was illegal, and that is the only reason.

**Prof. Hickie**—What we know, in a sense, transmits use across generations. Having a generation that have had a set of experiences and that perceive it to be common, they are therefore less likely to influence their children not to use that substance; whereas they have actually taken quite strong views on smoking, for example, although their attitudes to alcohol have probably stayed the same. So that is one factor. Another issue of concern in the mental health field is the increased rate of other problems, of overt mental health problems such as anxiety and depression. As those rates go up, people will use more alcohol, tobacco and cannabis if there are not strong social taboos or structures that prevent it. So increasing mental health problems might be one of the other contributing factors.

**CHAIR**—Why are mental health problems increasing?

**Prof. Hickie**—Again, that is not a resolved argument. The most commonly suggested is a social factor, which is known as ‘decreased social connection’—that is, we are not in contact with each other in nearly the same way that we were. The major losers out of that are children and adolescents. Once you are a developed adult who has got coping strategies, you are more able to function on your own and will be more responsible for your mental health. It still matters in your social world, but—

**CHAIR**—So are you saying it is the divorce rate?

**Prof. Hickie**—One of the factors is not just divorce per se but how many people you have. It is not just whether you have one parent or two but it is also access to grandparents, aunts, uncles and extended family. Clearly, divorce and family separation may not only rob you of one parent but they may also rob you of a whole lot of other particular individuals. It is also about the person next door, the local sporting club, the local church, the local Rotary Club and a whole lot of community organisations. If you look at the pattern of social participation in Australia—

whether it is churches, RSL clubs, sporting clubs or within families—it has declined. Children are more isolated. The suggestion is that they have less access to functional adults to learn coping skills. In addition, in times of crisis, they are actually less protected; they have fewer people to help them through tough times. Most social theorising is around those issues of decreasing social connection, and the big losers out of that are not mature adults but kids and teenagers during their years of development.

Another issue that is contested is whether the increase in rates of drug use have also contributed to the increase in rates of mental illness. A lot of the proponents that say drugs are safe say there has been no increase in rates, but there has actually been an increase in rates of anxiety and depression. It is less clear to say that there has been an increase in rates in psychosis, but psychosis probably requires you to have a considerable predisposition to the disorder in the first place—so only a proportion of society has that predisposition.

We have seen increases in rates of anxiety and depression. If cannabis use and other substances contribute to that then we have actually seen an increase. So there is a circular argument about mental health changes—changes in society contributing to increased mental health problems and mental health problems themselves, particularly in teenagers. The first place that teenagers go is not to health care services—

**CHAIR**—It is their peers

**Prof. Hickie**—it is to peers, and the most common response from peers is, ‘Let’s go and have a drink together,’ or, ‘Let’s go and have a smoke together.’ It is not to seek health care; it is to support the person, and it may well involve substance use in an attempt to manage difficult psychological symptoms.

**CHAIR**—The other area where we have seen growth is in youth suicide, particularly young men.

**Prof. Hickie**—Many people have worried that the increase in anxiety and depression is simply a reporting factor. People seem to be talking about it more—they think maybe that is why rates are going up. But in the mental health field, rates of anxiety and depression, drug and alcohol abuse, and suicide have all gone up. So we do not think it is a reporting factor; we think it is a genuine, broader social factor

**CHAIR**—Suicide always gets reported, so you can actually measure that one.

**Prof. Hickie**—Exactly; it is a fairly hard characteristic. The important thing about the suicide rate, with respect to the rapid increase in teenage suicide in particular, which was a focus of the eighties and nineties, is that we now see a rise in suicide in 25- to 44-year-olds. The generation that was affected in the late seventies through to the mid-nineties—who were teenagers then and who are now adults—have not grown out of it. The problems they developed have gone with them. We are now seeing an upswing in suicide rates not so much in the teenager area, which is already high—

**CHAIR**—But in that same cohort.



**Prof. Hickie**—but as those people have grown up. So there are the factors that changed during that generation. One of the issues in the drug debate that deserves more recognition is whether more drug use has contributed not just to the onset but also to worse outcomes. We do know that people with mental disorders who use substances are more likely to suicide—they have worse illnesses, they have poor recourse and worse response to treatment. Not only might drugs have contributed to more onsets—which they may have—but they may have contributed to worse outcomes as well, so that our chance to save lives has been affected.

**CHAIR**—Are people in the same age cohort more susceptible to early onset dementia, Parkinsonian diseases and all those sorts of brain diseases?

**Prof. Hickie**—We have good epidemiological evidence that depression, particularly chronic depression, is itself a risk factor to dementia in later life. Depression is also a risk factor to heart disease. We had publications in the *Medical Journal of Australia* in March this year by the Heart Foundation. Depression is a risk factor to heart disease of the same order as smoking, high blood fats, poor diet, poor exercise and high blood pressure. It is a really important risk factor. Heart disease and dementia are both long-term consequences.

**CHAIR**—When we talk about depression, are we talking about a lack of chemical activity in the brain?

**Prof. Hickie**—We know increasingly about the chemical correlates of depression—the things that accompany depression. Most of the current theories of depression revolve around serotonin usage. We know that, if you give medications that increase serotonin levels, they are antidepressants. But—by analogy, if we talk about aspirin— aspirin treats many things, but an aspirin deficiency is not necessarily the cause of those things. So serotonin related drugs certainly treat depression.

**CHAIR**—We do not know why aspirin works, either.

**Prof. Hickie**—We know a lot about the way aspirin works on prostaglandins and other factors but often having an effective treatment for an illness does not necessarily tell you the chemical cause. Certainly drugs that impact on serotonin, noradrenaline and dopamine—three major chemical systems—impact on behaviour, and certainly on mood. They are effective antidepressants. This has led to a lot of theorising about whether that is the basic deficit. We have recently had publications in *Science*—again out of New Zealand—suggesting an interaction between the serotonin transporter mechanism and life events. So if you have the gene for different serotonin metabolism, certain life circumstances increase your chances of developing depression. So it is increasingly plausible that serotonin metabolism is one of the critical factors that lead to depression. But we have largely relied on treatment evidence.

**CHAIR**—There was a study in the United States which got some coverage here—but which I think people want to redo before they give it full validity—saying that taking methamphetamine actually destroys the serotonin in the brain.

**Prof. Hickie**—There is a lot of basic research at the moment about the effects of either short-term or chronic administration of many of the common substances—particularly those that stimulate the dopaminergic system, like amphetamines, which is relevant to drug use, to patterns

of addiction, and certainly to psychosis, particularly schizophrenia—and the long-term effect on the nerve cells or the neural mechanisms. This remains an incredibly important area of research, as yet unresolved.

On the other side of the coin, what we know about the brain is its so-called plasticity—that it can recover. We used to teach medical students that the brain cells you had at birth were the ones you had for life—you had better be careful with them, you will lose them, they will not come back. We increasingly know that is not the case and the brain changes rapidly in response to different issues. We see this with alcohol—that, in fact, certain degrees of damage are recoverable after long-term abstinence from that substance. So there are two issues. It is likely that many of the substances in our society do cause cell death within the brain, but many of those functions may be recoverable if the substance use or abuse is stopped. We do not know at this stage which ones are toxic for life versus ‘maybe recoverable’.

**CHAIR**—What you are really telling us is that we have to somehow change the perception of these drugs—particularly marijuana—to the cohorts using it, but more particularly those coming up.

**Prof. Hickie**—I make one additional comment, in terms of the terms of reference of this inquiry. People who have mental illness obviously are over-represented in the jail population and in the criminal population et cetera. So in the face of the mental health service systems we have, and in the face of the outcomes of crime in Australia, a really important issue is that people who have significant mental health problems are over-represented. Therefore, if we had a choice, we would want the rate of cannabis use amongst our teenagers to go back from the 50 or 60 per cent it has now reached to much lower levels.

**CHAIR**—Like nil.

**Prof. Hickie**—Ideally. As with tobacco use, it would be nil because we would recognise it as a harmful substance. So ideally nil or at least to progressively decrease it. The issue becomes at a public health level what mechanisms do we have available, and clearly attitudinal ones are important. If a drug is perceived as a social lubricant or as recreational, and particularly if it is perceived—a point I wanted to make earlier about parents—by parents in that way and they use themselves—

**CHAIR**—Or the ABC—when you hear an ABC announcer refer to illegal drugs as ‘recreational drugs’ you wonder what we are coming to.

**Prof. Hickie**—From a medical point of view our contribution to the debate is to try to portray accurately, if we can, what we know. As I say about the alcohol situation, it is complex. For the cannabis situation we have increasing evidence of harm, so the notion of ‘recreational’ conveying a message of no harm would be inaccurate from a medical point of view. Therefore, as with the smoking situation, where we have seen dramatic changes in Australia, the goal for cannabis would be to head in the same direction—to decrease the total amount of cannabis use. Estimates have been made in Sweden and in Holland about if you modelled this, how much might you reduce the rate of schizophrenia in your society, for example, or of other serious illnesses.

**CHAIR**—But the problem is that the people who are using it do not believe that it is connected to schizophrenia or any of the other things, because they have had decades of people telling them it is okay.

**Prof. Hickie**—The educational and medical contribution is just like when we saw doctors in the 1950s say, ‘I think smoking is a problem.’ By the 1960s they said, ‘It is definitely a problem.’ And in the seventies and eighties they became proactive and said, ‘We must stop this. We must engage every possible legislative’—

**CHAIR**—But it was not scrambling their brains.

**Prof. Hickie**—No. But, in public health terms, I think we have good models of ways to proceed. The message that we are portraying about harm through the professions, education and legislation has definitely been very clear.

**Ms PANOPOULOS**—You have said that cannabis use in the teenage years can be more harmful or have a greater impact than cannabis use later on, because the young adult brain is developing. You also said that a significant influence on the increased use of cannabis amongst teenagers in the last 10 years is attributable to parental attitudes—the baby boomers. Would you therefore recommend to governments trying to deal with the increased use of cannabis amongst teenagers that their campaigns be particularly targeted to parents?

**Prof. Hickie**—Both. I think the evidence we have from smoking cessation, the best example of really reducing a substance use in our society, is that we need both. As we see now with parents, pregnant women or with people saying, ‘It is in your child’s interest to stop smoking. They won’t stop smoking if you continue smoking,’ that is an important target group. But teenagers themselves are an important target group. What message we are sending in a broad sense is important. We do know that continuing to use a substance in your own household freely is one of the strongest determinants of whether kids will take up that particular habit. There is the wider social environment, but your own microenvironment and what substances are seen as normal or without harm are very strong determinants of what the next generation will do.

**CHAIR**—That is of particular concern to me. I agreed to take part in a function at my local library not so long ago. We were launching some publications about where to get legal information and assistance. Suddenly, slipped in at the side, there were some new publications about illegal drugs. I picked up the one about ecstasy and opened it up. It said, ‘If you take ecstasy, it will make you feel more confident.’ It is a promotional pamphlet put out by the Premier of New South Wales! How do you stop that sort of stuff?

**Prof. Hickie**—In all educational materials, there is an issue of providing accurate information. In these situations, it is about harm.

**CHAIR**—This is basically telling kids, ‘It’s really okay.’

**Prof. Hickie**—I think the chair has raised important issues about what public figures and public bodies say. I think that, because of a whole lot of other debates about other substances in our society, the cannabis issue is one that has been relatively ignored or put to the side because of debates about other things. In New South Wales, it is particularly debates about stimulant use;

in most capital cities, debates are about heroin use; and, in the broader society, it is about alcohol and tobacco. I think the cannabis issue has been relatively ignored. That represents a serious public health issue, given what we now know about the likely effects on the population as a whole. The level of usage is so high in the population as a whole—particularly amongst our teenagers—that this will increasingly be an area of public health concern.

**CHAIR**—It has been so refreshing to hear unequivocal statements from you, which are usually couched and hedged. Yours are based on good evidence, and we are very grateful to you for coming today. I will finish by asking you about one other substance: methadone. Where does it fit in?

**Prof. Hickie**—I have tried to confine my comments to issues that I do know about. The issue of methadone usage is not an area in which I would consider myself able to provide you with medical expertise.

**CHAIR**—In that case, I reiterate that what you have had to tell us today has been tremendous with regard to the directions that the inquiry is looking at about prevention of crime and the need to find some strong strategies for getting some good messages out. I thank you very much for coming today.

Resolved (on motion by **Ms Panopoulos**):

That this subcommittee authorises publication, including publication on the parliamentary database, of the proof transcript of the evidence given before it at public hearing this day.

**Subcommittee adjourned at 12.55 p.m.**